

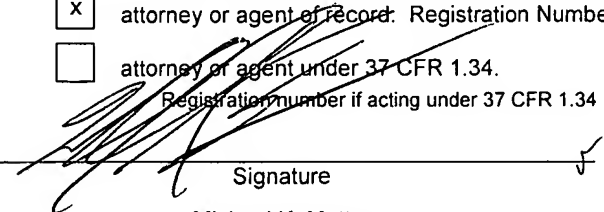


|   |  |                          |                        |
|---|--|--------------------------|------------------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> |  | <b>Complete if Known</b> |                        |
| <b>FEE TRANSMITTAL</b><br><b>For FY 2008</b>  |  | Application Number       | 10/788,444-Conf. #9990 |
|   |  | Filing Date              | March 1, 2004          |
|   |  | First Named Inventor     | Mark CASEBOLT          |
|   |  | Examiner Name            | J. T. Nguyen           |
|   |  | Art Unit                 | 2629                   |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                                    |  | Attorney Docket No.      | 5486-0222PUS1          |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |  | <b>(\$)</b>              | <b>120.00</b>          |

|  |   |
|--|---|
| <b>METHOD OF PAYMENT (check all that apply)</b>  |   |
| <input type="checkbox"/> Check   | <input type="checkbox"/> Credit Card  |
| <input type="checkbox"/> Money Order   | <input type="checkbox"/> None   |
| <input type="checkbox"/> Other (please identify): _____  |   |
| <input checked="" type="checkbox"/> Deposit Account  | Deposit Account Number: <u>02-2448</u>  |
| Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>  |   |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

|   |                     |   |                                |                      |                                  |                       |                       |
|---|---------------------|---|--------------------------------|----------------------|----------------------------------|-----------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                                |                      |                                  |                       |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                                |                      |                                  |                       |                       |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b>             |                      | <b>EXAMINATION FEES</b>          |                       |                       |
|   |                     | <b>Small Entity</b>                                     |                                | <b>Small Entity</b>  |                                  | <b>Small Entity</b>   |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Fee (\$)</b>   | <b>Fee (\$)</b>                | <b>Fee (\$)</b>      | <b>Fee (\$)</b>                  | <b>Fee (\$)</b>       | <b>Fees Paid (\$)</b> |
| Utility   | 310                 | 155   | 510                            | 255                  | 210                              | 105                   |                       |
| Design  | 210                 | 105   | 100                            | 50                   | 130                              | 65                    |                       |
| Plant   | 210                 | 105   | 310                            | 155                  | 160                              | 80                    |                       |
| Reissue   | 310                 | 155   | 510                            | 255                  | 620                              | 310                   |                       |
| Provisional   | 210                 | 105   | 0                              | 0                    | 0                                | 0                     |                       |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                                |                      |                                  |                       |                       |
|   |                     |   |                                |                      |                                  | <b>Small Entity</b>   |                       |
| <b>Fee Description</b>  |                     |   |                                |                      |                                  | <b>Fee (\$)</b>       | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                     |   |                                |                      |                                  | 50                    | 25                    |
| Each independent claim over 3 (including Reissues)  |                     |   |                                |                      |                                  | 210                   | 105                   |
| Multiple dependent claims   |                     |   |                                |                      |                                  | 370                   | 185                   |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> |                       |                       |
| 31 - 31 = 0   |                     | x 50.00   | = 0.00                         |                      |                                  |                       |                       |
| HP = highest number of total claims paid for, if greater than 20.   |                     |   |                                |                      |                                  |                       |                       |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b> |                                  |                       |                       |
| 5 - 5 = 0   |                     | x 210.00  | = 0.00                         |                      |                                  |                       |                       |
| HP = highest number of independent claims paid for, if greater than 3.  |                     |   |                                |                      |                                  |                       |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                                |                      |                                  |                       |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                                |                      |                                  |                       |                       |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b> |                                  |                       |                       |
|   | - 100 =             | /50 =   | (round up to a whole number) x | =                    |                                  |                       |                       |
| <b>4. OTHER FEE(S)</b>  |                     |   |                                |                      |                                  |                       |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                                |                      |                                  | <b>Fees Paid (\$)</b> |                       |
| Other (e.g., late filing surcharge), 1251 Extension for response within first month   |                     |   |                                |                      |                                  | 120.00                |                       |

|                     |                   |                                   |                   |
|---------------------|-------------------|-----------------------------------|-------------------|
| <b>SUBMITTED BY</b> |                   |                                   |                   |
| Signature           |                   | Registration No. (Attorney/Agent) | 29,680            |
| Name (Print/Type)   | Michael K. Mutter | Telephone                         | (703) 205-8000    |
|                     |                   | Date                              | February 29, 2008 |

|   |                                  |   |   |
|---|----------------------------------|---|---|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>   |                                  | Docket Number (Optional)<br>5486-0222PUS1 |   |
| Application Number      10/788,444-Conf. #9990  |                                  | Filed      March 1, 2004                  |   |
| For      DYNAMICALLY ADJUSTING OPERATION OF ONE OR MORE SENSORS OF A COMPUTER INPUT DEVICE  |                                  |   |   |
| Art Unit      2629  |                                  | Examiner      J. T. Nguyen                |   |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |                                  |   |   |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |                                  |   |   |
| <input checked="" type="checkbox"/>   | One month (37 CFR 1.17(a)(1))    | Fee<br>\$120                              | Small Entity Fee<br>\$60      \$ 120.00 |
| <input type="checkbox"/>  | Two months (37 CFR 1.17(a)(2))   | \$460                                     | \$230      \$                           |
| <input type="checkbox"/>  | Three months (37 CFR 1.17(a)(3)) | \$1050                                    | \$525      \$                           |
| <input type="checkbox"/>  | Four months (37 CFR 1.17(a)(4))  | \$1640                                    | \$820      \$                           |
| <input type="checkbox"/>  | Five months (37 CFR 1.17(a)(5))  | \$2230                                    | \$1115      \$                          |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |                                  |   |   |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |                                  |   |   |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |                                  |   |   |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |                                  |   |   |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet. |                                  |   |   |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>   |                                  |   |   |
| I am the <input type="checkbox"/> applicant/inventor.   |                                  |   |   |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |                                  |   |   |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>29,680</u>  |                                  |   |   |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |                                  |   |   |
| <br>Signature  |                                  | <u>February 29, 2008</u><br>Date          |   |
| <u>Michael K. Mutter</u><br>Typed or printed name   |                                  | <u>(703) 205-8000</u><br>Telephone Number |   |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                 |                                  |   |   |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.   |                                  |   |   |

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